

PTO/SB/82 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/711,718
	Filing Date	SEPTEMBER 30, 2004
	First Named Inventor	GARY O. STRINGER
	Art Unit	
	Examiner Name	
Attorney Docket Number	50131.0002	

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

RECEIVED

CENTRAL FAX CENTER

MAR 23 2005

OR

 I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	GARY STRINGER, DESIGN DEVELOPMENT RESOURCES, INC.			
---	---	--	--	--

Address	347 LUSTER DRIVE			
---------	------------------	--	--	--

City	BRANSON	State	MO	Zip	65616
------	---------	-------	----	-----	-------

Country	USA			
---------	-----	--	--	--

Telephone	1-417-339-0090	Fax	1-417-339-0090		
-----------	----------------	-----	----------------	--	--

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Gary Stringer</i>		
Name	GARY STRINGER		
Date	3-23-2005	Telephone	1-417-339-0090

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/122 (09-04)

Approved for use through 07/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS**
Application

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	101711,718
Filing Date	09-30-2004
First Named Inventor	GARY D. STRINGER
Art Unit	
Examiner Name	
Attorney Docket Number	50131.0002

Please change the Correspondence Address for the above-identified patent application to:

The address associated with
Customer Number: _____

OR

Firm or
Individual Name **GARY STRINGER, DESIGN DEVELOPMENT RESOURCES, INC.**

Address **347 LUSTER DRIVE**City **BRANSON**State **MD**Zip **65616**Country **USA**Telephone **1-417-339-0090**Fax **1-417-339-0090**This form cannot be used to change the data associated with a Customer Number. To change the
data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

Applicant/Inventor
 Assignee of record of the entire interest.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 Attorney or agent of record. Registration Number _____
 Registered practitioner named in the application transmittal letter in an application without an
 executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

*Gary D. Stringer*Typed or Printed
Name**GARY D. STRINGER**

Date

3-23-2005

Telephone

1-417-339-0090NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple
forms if more than one signature is required, see below.

Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.